PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

				ر <u>منتب ۱</u>	(-,-)				
INSTRUCTIONS: This appropriate, All further indicated unless correcte maintenance fee notifical	ed below or directed our	or tran ig the l ierwise	smitting the ISSU Patent, advance or in Block 1, by (a) specifying a new co	rrespor	idelice address,	and or	(b) indicating a sepa	ould be completed where correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPONDI	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.								
39072	7590 11/28	/2007							TRANSMISSION
MYERS BIGE	I hereby certify that this Fee(s) Transmittal is being transmitted via								
P.O. BOX 37428	3			the Office electronic filing system in accordance with § 1.6(a)(4) to					
RALEIGH, NC		the U.S. Patent and Trademark Office, on the date indicated belo							
				'lfacy			Wallace		(Depositor's name)
						Trace	w.	ellar	(Signature)
						January	24.	2008	(Date)
APPLICATION NO. FILING DATE				FIRST NAMED INVENTOR				RNEY DOCKET NO.	CONFIRMATION NO.
10/669,399 09/23/2003			Scott Morris			9400-39 3957			
TITLE OF INVENTION RELATED SYSTEMS A	i; METHODS OF RESI	ETTING GRAM	G PASSWORDS I PRODUCTS	N NETWORK SERV	ICE SY	YSTEMS INCL	UDING	USER REDIRECTI	ON AND
APPLN, TYPE	YPE SMALL ENTITY		SUE FEE DUE	PUBLICATION FEE DUE		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	!	\$1440	\$0		\$0		\$1440	02/28/2008
EXAMINER			ART UNIT	CLASS-SUBCLASS	CLASS-SUBCLASS				
BAUM, RONALD			2136	726-006000	726-006000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 Myers Bigel Sibley & Sajovec, P.A. 2 3					
3. ASSIGNEE NAME A	ND RESIDENCE DAT.	A TO E	BE PRINTED ON	THE PATENT (print o	or type)				
		tified b pletion	elow, no assignee of this form is NO						ocument has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Wilmington, Delaware									
AT&T Delaware	Intellectual	Prop	erty, Inc.	formerly kn	nwor	as			
BellSouth Intellectual Property Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): Undividual Corporation or other private group entity Government									
4a. The following fee(s) Issue Fee	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.								
Publication Fee (No small entity discount permitted) Advance Order - # of Copies				Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0220 (enclose an extra copy of this form).					
5. Change in Entity Sta	atus (from status indicate			☐ b. Applicant is no	olonge	r claiming SMA	LL EN	TITY status. See 37 C	FR 1.27(g)(2).
NOTE: The Issue Fee an	nd Publication Fee (if rec	quired)	will not be accepte	ed from anyone other the	han the	applicant; a reg	istered	attorney or agent; or t	he assignee or other party in
Authorized Signature Authorized Signature Date January 24, 20								ary 24, 2008	3
Typed or printed nan			Registration 1	No	38,176				
This collection of informan application. Confider submitting the complete this form and/or sugges Box 1450, Alexandria, Alexandria, Virginia, 2	nation is required by 37- ntiality is governed by 3 ed application form to the tions for reducing this by Virginia 22313-1450. D	CFR 1. 5 U.S.C le USP urden, s O NOT	311. The informati C. 122 and 37 CFR FO. Time will var should be sent to the SEND FEES OR	on is required to obtain 1.14. This collection is depending upon the chief Information C COMPLETED FORM	n or retain estimation individual officer, and the transfer of	ain a benefit by nated to take 12 ual case. Any co U.S. Patent and THIS ADDRES	the pub minute ommen Trader S. SEN	lic which is to file (an s to complete, includi ts on the amount of ti mark Office, U.S. Dep D TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.